

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

GOOD FUND, THE

ADDRESS (number and street)

PO BOX 6572

Check if different
than previously
reported. (ACC)

SPRINGFIELD

VA

22150

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00409185

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15
Quarterly Report (Q1)
- ☐ July 15
Quarterly Report (Q2)
- ☐ October 15
Quarterly Report (Q3)
- ☐ January 31
Year-End Report (YE)
- ☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)
- ☐ Termination Report
(TER)

(b) Monthly
Report
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☒ Nov 20 (M11)
(Non-Election
Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)
(Non-Election
Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of(d) 30-Day
POST-Election
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
10 01 2017

through

M M M / D D D / Y Y Y Y Y Y
10 31 2017

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

McMenamin, Laura, , ,

Type or Print Name of Treasurer

Signature of Treasurer

McMenamin, Laura, , ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
11 02 2017

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

GOOD FUND, THE

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
10		01		2017

To:

M M	/	D D	/	Y Y Y Y Y
10		31		2017

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <div><div>Y Y Y Y Y</div><div>2017</div></div>		<div><div></div><div>112396.95</div></div>
(b) Cash on Hand at Beginning of Reporting Period.....	<div><div></div><div>127555.98</div></div>	
(c) Total Receipts (from Line 19)	<div><div></div><div>7000.00</div></div>	<div><div></div><div>210237.02</div></div>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<div><div></div><div>134555.98</div></div>	<div><div></div><div>322633.97</div></div>
7. Total Disbursements (from Line 31).....	<div><div></div><div>11550.00</div></div>	<div><div></div><div>199627.99</div></div>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<div><div></div><div>123005.98</div></div>	<div><div></div><div>123005.98</div></div>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<div><div></div><div>0.00</div></div>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<div><div></div><div>0.00</div></div>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

GOOD FUND, THE

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		0	1		2	0	1	7		

To:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0		3	1		2	0	1	7		

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	23000.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	0.00	23000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	7000.00	187237.02
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	7000.00	210237.02
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	7000.00	210237.02
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	7000.00	210237.02

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	5050.00	128727.99
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	5050.00	128727.99
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2000.00	57150.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	4500.00	13750.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	11550.00	199627.99
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	11550.00	199627.99

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	7000.00	210237.02
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7000.00	210237.02
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	5050.00	128727.99
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	5050.00	128727.99

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 12
(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

GOOD FUND, THE

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
BUILD POLITICAL ACTION COMMITTEE OF THE NATIONAL ASSOCIATION OF HOME BUILDERS (BUILDPAAC)

Mailing Address 1201 15TH STREET, NW

City
WASHINGTON

State
DC

Zip Code
20005

FEC ID number of contributing
federal political committee.

C C00000901

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 31 / 2017

Transaction ID : 2885

Amount of Each Receipt this Period

5000.00

☐ Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
CBS CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 801 PENNSYLVANIA AVE NW
SUITE 450

City
WASHINGTON

State
DC

Zip Code
20004

FEC ID number of contributing
federal political committee.

C C00423442

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 31 / 2017

Transaction ID : 2886

Amount of Each Receipt this Period

2000.00

☐ Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

7000.00

7000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 7 OF 12

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

GOOD FUND, THE

Full Name (Last, First, Middle Initial)

A. Goodlatte, Robert, W., ,

Mailing Address 5341 Fox Ridge Road

City
RoanokeState
VAZip Code
24018Purpose of Disbursement
Travel Expense Reimbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2017

FEC Identification Number

C**Transaction ID : 2878**

Amount of Each Disbursement this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Hinaman & Company

Mailing Address P.O. Box 863

City
AlexandriaState
VAZip Code
22313Purpose of Disbursement
Consultant: Political

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2017

FEC Identification Number

C**Transaction ID : 2879**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Laura Bell Consulting, Inc.

Mailing Address 7007 Springville Court

City
SpringfieldState
VAZip Code
22150Purpose of Disbursement
Consultant: Fundraising

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2017

FEC Identification Number

C**Transaction ID : 2880**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4550.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 8 OF 12

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

GOOD FUND, THE

Full Name (Last, First, Middle Initial)

A. Political Compliance Services

Mailing Address 912 Saint Michael Drive

City
GambrillsState
MDZip Code
21054Purpose of Disbursement
Consultant: Compliance

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2017

FEC Identification Number

C**Transaction ID : 2861**

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

500.00

5050.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 9 OF 12

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

GOOD FUND, THE

Full Name (Last, First, Middle Initial)

A. CURTIS FOR CONGRESSMailing Address 370 EAST SOUTH TEMPLE
SUITE 580City
SALT LAKE CITYState
UTZip Code
84111Purpose of Disbursement
Political Contribution

Candidate Name

CURTIS, JOHN, , ,Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2018
☒ Primary ☐ General
☐ Other (specify) ▼

State: UT District: 03

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			0	5			2	0	1	7		

FEC Identification Number

C C00647339**Transaction ID : 2876**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ELECT BLAKE FARENTHOLD COMMITTEE

Mailing Address PO BOX 3369

City
CORPUS CHRISTIState
TXZip Code
78463Purpose of Disbursement
Political Contribution

Candidate Name

FARENTHOLD, RANDOLPH, BLAKE, ,Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2018
☒ Primary ☐ General
☐ Other (specify)

State: TX District: 27

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			0	2			2	0	1	7		

FEC Identification Number

C C00473736**Transaction ID : 2870**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2000.00

2000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 12

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

GOOD FUND, THE

Full Name (Last, First, Middle Initial)

A. Bethany Harrison for Commonwealth's Attny

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2017

Mailing Address 304 Riverside Drive

City
LynchburgState
VAZip Code
24503Purpose of Disbursement
State Candidate Political Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : 2872**

Amount of Each Disbursement this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Ed Gillespie for Governor

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		04		2017

Mailing Address P.O. Box 71596

City
RichmondState
VAZip Code
23255Purpose of Disbursement
State Candidate Political Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : 2874**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Friends of Mark Obenshain

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2017

Mailing Address P.O. Box 555

City
HarrisonburgState
VAZip Code
22803Purpose of Disbursement
State Candidate Political Contribution

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

FEC Identification Number

C**Transaction ID : 2881**

Amount of Each Disbursement this Period

500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2750.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 12

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

GOOD FUND, THE

Full Name (Last, First, Middle Initial)

A. Jason Peters for Supervisor

Mailing Address P.O. Box 147

City
VintonState
VAZip Code
24179Purpose of Disbursement
State Candidate Political Contribution

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2017

FEC Identification Number

C**Transaction ID : 2873**

Amount of Each Disbursement this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. LeMunyon for Delegate

Mailing Address P.O. Box 220732

City
ChantillyState
VAZip Code
20153Purpose of Disbursement
State Candidate Political Contribution

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2017

FEC Identification Number

C**Transaction ID : 2877**

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Wilt for Delegate

Mailing Address P. O. Box 1147

City
HarrisonburgState
VAZip Code
22803Purpose of Disbursement
State Candidate Political Contribution

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2017

FEC Identification Number

C**Transaction ID : 2882**

Amount of Each Disbursement this Period

500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1250.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 12 OF 12

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

GOOD FUND, THE

Full Name (Last, First, Middle Initial)

A. Yost for Delegate

Mailing Address 519 Wenonah Avenue

City
PearisburgState
VAZip Code
24134Purpose of Disbursement
State Candidate Political Contribution

Candidate Name

Yost for DelegateOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2017

FEC Identification Number

C**Transaction ID : 2871**

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

500.00

4500.00